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EAST RIDING OF YORKSHIRE COUNTY COUNCIL

**ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER**

FOR THE YEAR

1972



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**ANNUAL REPORT
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PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR
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Report of the Principal School Medical Officer

*To the Chairman and Members of the
Education Committee*

I have the honour to submit the Annual Report on the work of the School Health Service for the year 1972.

There have been a number of staff changes in the Department; Dr. P. P. Tiwari was appointed as Medical Officer in February, and Dr. S. Donohue as part-time Medical Officer in September. Dr. R. Jones resigned from her full-time appointment as Medical Officer in the Haltemprice area in June. Mr. D. Mathews, full-time Dental Officer, resigned in May and so far it has only been possible to replace him with a part-time officer. Mrs. A. M. Gough resigned as Senior Speech Therapist in July, and her post was taken over by Mrs. M. R. Lee, who was already a member of the speech therapy staff. One full-time and two part-time speech therapists were appointed thus completing the establishment of speech therapists for the first time in three years. Mrs. A. B. Godfrey, Psychiatric Social Worker, who had been with the Authority since December, 1962, resigned on the 30th April and her position has been taken by Miss P. C. West, a recently qualified social worker, who took up her appointment on the 1st August.

There is considerable uncertainty about the future among the staff of child guidance clinics, particularly social workers, due to the absence of a clearly defined staffing structure for this service. After re-organisation in April, 1974, it is to be hoped that the child guidance service will continue to be staffed on a multi-disciplinary team basis with properly trained and experienced professional workers, on similar lines to those which have been developed in recent years.

An intensive residential course, of two weeks duration, for children who stammer was held in the Driffield Special School during the Easter holiday. As this was the first occasion on which this type of course had been held, all the children attending were carefully assessed both during and after the course to ascertain the extent of the benefit, if any, which resulted from this intensive therapy. The experiment proved worthwhile as most of the children's speech improved, and a follow-up showed that in many cases this improvement was maintained.

As a result of the increasing integration of health visiting staff with the general practitioner services to create "Primary Care Teams" in the community, it has been necessary to appoint a number of part-time school nurses to carry out the more routine school nursing duties, such as inspection for infestation, routine eye testing, and to help at routine medical examinations in schools. However, this policy is not intended to divorce the health visitor entirely from school work, and each health visitor is encouraged to keep in touch with the schools in the practice area in which she works. An in-service training course for all school nurses was held in Beverley at which various aspects of school health service work were considered. This course was appreciated by the staff, many of whom were recently appointed part-time school nurses.

In order to improve the facilities for several subnormal children, the Authority agreed to open two additional centres, both of these in recently vacated school premises, one in the Hedon area and the other in Beverley. These improved facilities, while not ideal, at least made it possible for the children to be taught and looked after in smaller groups with resultant benefits to both the children and staff.

I am indebted to the Chairman and Members of the Committee, and the Chief Education Officer and his staff, for their continued encouragement and support in the work of the School Health Service.

W. FERGUSON
Principal School Medical Officer

May, 1973.

GENERAL STATISTICS

Number of Schools— Primary.....	151
Secondary.....	21
Nursery.....	1
Special	3
Number of Pupils— Primary.....	27,079
Secondary.....	17,133
Nursery.....	40
Special (a) From the County.....	209
(b) From other Authorities..	24
	Total 44,485
Number of pupils attending special schools in other Authorities areas.....	125

MEDICAL INSPECTIONS

The number of pupils who received a full medical examination was 8,012 compared with 7,789 in 1971. In addition 4,694 pupils were screened but not examined. The details relating to these examinations are shown in the tables on page 21.

General Condition

The assessment of the general condition of all children examined at routine medical inspections is based on the individual opinion of each doctor. Medical Officers record the general condition of the children when examined as either 'satisfactory' or 'unsatisfactory'. The results over the last ten years are shown in the following table:—

Year	No. of pupils inspected	No. found in "unsatisfactory" condition	Percentage
1963	9,251	5	0.05
1964	8,724	3	0.03
1965	8,298	2	0.03
1966	8,693	5	0.06
1967	7,416	1	0.01
1968	8,126	3	0.03
1969	7,949	1	0.01
1970	7,939	—	0.00
1971	7,789	—	0.00
1972	8,012	—	0.00

WORK OF SCHOOL NURSES

The school nurses carried out regular routine health surveys in schools and paid follow-up visits where necessary. Their work also included attendance at routine and special examinations in schools, minor ailment clinics and home visits when required.

The following tables show the total number of visits, the number of children examined, and the number found infested:—

Visits to schools:	1971	1972
Number of routine health survey examination sessions	548	566
Number of health survey examinations carried out.....	67,261	76,770
Number of children found infested.....	427	513
Number of follow-up visits.....	77	65
 Visits to homes:		
Number of homes visited.....	764	725
Number of children seen for:—		
Uncleanliness.....	382	534
Minor ailments.....	96	88
General condition.....	5	4
Other reasons.....	474	294
Totals	<hr/> 957	<hr/> 920

The following table gives particulars of cleanliness inspections carried out over the last ten years:—

Year	Number of examinations	Number of children infested	School population	Percentage of school population infested
1963	59,868	408	33,635	1.2
1964	62,466	567	33,899	1.7
1965	62,091	415	34,618	1.2
1966	55,740	427	35,390	1.2
1967	60,607	404	36,839	1.09
1968	61,236	277	38,214	1.72
1969	60,941	372	39,739	0.94
1970	71,245	533	41,195	1.3
1971	67,261	427	43,003	0.99
1972	76,770	513	44,485	1.15

VISUAL DEFECTS AND EXTERNAL EYE DISEASES

Refraction clinics continued to be held regularly at Anlaby, Beverley, Fulford, Howden, Pocklington and occasionally at Market Weighton.

A doctor seconded by the Regional Hospital Board staffs the Anlaby and Beverley clinics and a School Medical Officer who has been specially trained in refraction work, staffs the clinics in the Howdenshire area.

The total number of children seen at the clinics was 663, and the prescriptions issued totalled 291 of which 248 were for complete spectacles.

In those areas of the County where it has not been possible to hold clinics children have continued to be referred to hospital consultants through their family doctors.

EAR, NOSE AND THROAT DEFECTS AND DEFECTIVE HEARING

Forty-six children were found at routine and special medical examinations to be in need of treatment for defects of the ear, nose and throat. In addition 1,067 children were referred for observation.

Special audiometric sessions were held throughout the County and 3,632 children were examined by means of the pure tone audiometer. Sixty-two cases in which some degree of deafness was discovered were referred to ear, nose and throat consultants through the family doctor.

A part-time teacher of the deaf is employed by the Authority to visit hearing impaired children in their homes in order to carry out assessment when necessary. In addition, parents of these children are instructed by this teacher in the techniques necessary to help their children so that maximum use can be made of the available hearing. Where a hearing aid has been provided parents are instructed in its use.

MINOR AILMENTS

Minor ailment sessions are conducted by the school nurses who refer any case of a more serious nature to the child's family doctor or to the school medical officer.

The table overleaf shows the number of children who attended the minor ailment clinics and the various types of defects which were treated together with the number of children who received home visits by the school nurses.

Defects	1971		1972	
	No. of children		No. of children	
	attending clinics	receiving home visits	attending clinics	receiving home visits
Ringworm (head).....	—	2	—	—
Ringworm (body).....	—	—	2	—
Scabies.....	25	9	20	4
Impetigo.....	11	4	35	8
Other skin diseases.....	111	5	202	12
Minor eye defects.....	43	21	44	14
Minor ear defects and deafness.....	21	9	24	6
Minor injuries bruises etc.....	542	4	385	9
Totals.....	753	54	712	53

The number of attendances for treatment of minor ailments was 1,570 compared with the previous year's figure of 1,486. In addition, school nurses made 106 home visits.

CHIROPODY

In the Beverley area a chiropody service was provided for school children in the form of a weekly foot clinic held by one of the Authority's full-time chiropodists to which some 176 children made 717 visits for treatment. The chiropodist's services were required mainly for the treatment of verrucae.

An additional foot clinic was opened in February at the Hessle Health Centre and 20 children made 59 visits for treatment. However, the clinic had to be closed temporarily in September when the chiropodist became ill.

B.C.G. VACCINATION

B.C.G. vaccination against tuberculosis is available to school children over the age of 13 years and in certain instances it may be offered to children over 10 years of age. It is also available to students at universities and training colleges.

Vaccination was offered to 7,077 children of whom 5,905 (i.e. 83.4%) accepted. A total of 5,114 children were skin tested and of these 4,300 (i.e. 84%) showed a negative result and, therefore, required vaccination. Arrangements were made as far as possible for all children who had a positive skin test to be x-rayed and for this facility to be extended to the members of their families.

It is noteworthy that there was a substantial increase in the total number of skin tests and B.C.G. vaccinations carried out as compared with recent years.

The following table gives the details of the B.C.G. vaccinations carried out during the past ten years:—

Year	No. of school children skin tested	Positive reactors	Negative reactors	Number vaccinated
1963	2,634	586 (22.2 %)	1,938	1,907
1964	2,276	368 (16.2 %)	1,839	1,838
1965	2,272	490 (21.6 %)	1,741	1,726
1966	2,705	488 (18.0 %)	2,151	2,137
1967	1,874	260 (13.8 %)	1,581	1,573
1968	2,891	308 (10.7 %)	2,486	2,444
1969	1,831	86 (4.7 %)	1,694	1,683
1970	2,119	258 (12.2 %)	1,828	1,806
1971	1,642	339 (20.6 %)	1,298	1,298
1972	5,114	814 (15.9 %)	4,300	4,247

SPEECH THERAPY

The newly appointed Speech Therapists helped considerably in reducing the waiting list and for the first time in several years the number of children awaiting treatment at the end of the year fell below one hundred.

The number of children awaiting and receiving treatment over the past three years reflects the gradually improving staffing position. At the end of 1970, 1971 and 1972 the number of children on the waiting list was 142, 142 and 92 respectively. The number of children who received treatment in the various categories of speech defect is shown in the following table:—

Type of Speech Defect	No. of children receiving treatment at end of year			No. of children whose treatment was completed		
	1970	1971	1972	1970	1971	1972
Articulation defects ..	67	56	120	268	120	149
Delayed speech	64	73	106	105	83	147
Dysphasia	13	9	8	1	2	5
Voice disorder	—	1	—	5	3	3
Cleft palate	3	6	3	5	2	2
Cerebral palsy	2	—	4	4	3	—
Stammer	17	13	14	27	22	28
Other defects	2	7	—	31	9	16
Totals	168	165	255	446	244	350

A residential intensive course for stammerers was held at the Driffield Special School for two weeks during the Easter holiday and nine children in the 11 to 14 year old age group attended. In most cases fluency of communication was improved. The individual problems which these stammerers experienced was observed and appropriate courses of action were taken. The treatment was based on the use of the electronic metronome and during the remainder of the year considerable follow-up work was done with the children in their own schools.

PROVISION OF MILK AND MEALS

Of those pupils eligible to receive free school milk 8,795 were taking it compared with 8,694 in 1971.

The number of children taking school meals continued to recover from the set-back caused by the price increase in 1971 and at the end of 1972 a total of 26,064 meals a day were being supplied. 64.5% of the pupils are now taking school meals compared with 61% at the end of 1971.

HEALTH EDUCATION

Health education talks on a variety of subjects were given by school medical and nursing staff in schools throughout the County.

The following topics are worthy of special mention:—

During the summer term the Headmasters of two secondary schools in the Haltemprice area requested talks on venereal disease to be given to their senior pupils of both sexes. The talks were illustrated with a film strip and each session finished with a discussion and questions. A total of 235 pupils were present and judging by the number and variety of questions put forward there can be little doubt such talks on this subject are fulfilling a need for teenage pupils.

Lectures and demonstrations on mouth to mouth resuscitation were given in a number of schools. Both teaching staff and parents attended for these sessions, and practical instruction on the training model was included. It is hoped that in future more schools, especially those with swimming pools, will take advantage of this type of instruction.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

A full-time Officer who had been with the Authority for a year after qualification decided to move to private practice. However, the staffing situation was partially restored by a private practitioner wishing to assist for five sessions a week.

The vacancy for an Auxiliary still exists and as the demand for this category of ancillary is high, the prospects of filling the post are remote.

The Hessle Health Centre opened in January and while providing first class working conditions for the Dental Officer, also makes attendance for the patients much less of a problem. A start was made to the Health Centre in Beverley but completion is not expected before the autumn of 1973. It is unlikely that work on the Health Centre at Bridlington will be started before the end of 1973.

The process of modernisation of equipment continued.

Dental Health Education

The publicity given to preventive dentistry during the past year, especially on television, has resulted in a further show of interest in methods designed to protect teeth from caries. Requests for topical application of fluoride have increased and many parents have enquired about fissure sealants. It is too early to assess the value of fissure sealants but it is expected that some workers in this field will claim high reductions in the caries rate. Topical application of fluoride produces a certain amount of benefit but it would seem that some claims may be a trifle optimistic. However, while fluoridation of water supplies is not acceptable to this Authority it is advisable to try out these other measures.

Children at a number of clinics have received topical application of fluoride but unfortunately one application does not make for sound teeth and it is, therefore, a recurrent and time consuming method of prevention. The application of topical fluoride to teeth has provided the Dental Hygienist with a further clinical interest and her returns of work have shown that 27 children under the age of five and 181 children in the five to nine age group, underwent this course of prevention.

For satisfactory reduction of caries, ingestion of fluoride tablets must be commenced during infancy and continued throughout most of school life. It cannot be expected that many parents will supervise the taking of tablets for the greater part of this time but no doubt such children as are at present receiving the tablets will eventually show that some of their teeth are more resistant to caries than others. As a community health measure, water fluoridation is the one certain measure of reducing the incidence of caries and one on which most observers are in agreement as to effectiveness and safety.

The Dental Hygienist continues to spend a proportion of her time visiting schools for the purposes of dental health education. At one large County Primary School the Headmistress arranges for the parents to attend a meeting at the beginning of each term on educational matters but sets time aside for a talk on dental health from a Dental Officer. This co-operation is much appreciated and the response has shown the worthwhile nature of this venture.

Inspection and Treatment

Inspection figures revealed little change from the previous year but the number of children requiring treatment dropped by 643.

A sizeable increase in the volume of work was shown in the age group five to nine. In this age group 232 additional children began a course of treatment compared with the previous year but particular reference must be made to an increase of 1,243 for fillings in deciduous teeth. Treatment commenced at an early age is most desirable and it is hoped that these figures indicate a greater awareness on the part of the parents to seek treatment on behalf of their young families. A satisfactory increase of almost 2,000 was shown in the number of fillings for the age group 10 to 14. Extractions for age group five to nine for both deciduous and permanent teeth remained much as before but the extractions for permanent teeth in the age group 10 to 14 increased by 241 and extractions in the age group 15 and over went up by 66. Not surprisingly, therefore, the number of general anaesthetics administered showed an increase of 195 with a larger contribution being made by the dental officers. Courses completed rose from 6,513 to 7,207 and crowns from 42 to 64. Orthodontic returns provided similar figures to last year.

With the staff having remained constant over a period of years and dental visits occurring annually in most areas, parents are placing more reliance on the school service. Clinics for the most part are excellently equipped and with a conscientious staff it is to be expected that a greater number of children will come under the care of the service. The figures for the past year indicate that of the number of children requiring treatment more are accepting the school dental service.

There has been excellent support from the consultants, both surgical and orthodontic. It would seem that the case load, as evidenced by the delays in obtaining appointments, for one orthodontist is becoming increasingly heavy and that further assistance may be indicated. Medical anaesthetists have again been most helpful.

Support from Head Teachers has been maintained and my thanks are due to them.

G. R. SMITH,
Principal School Dental Officer.

CHILD GUIDANCE CLINIC

Mrs. Godfrey, a part-time Psychiatric Social Worker, resigned in April because she was leaving the district. In August Miss West was appointed as a Social Worker.

The psychiatric cover to the Child Guidance Clinic continues to be inadequate because of the inability to fill a vacant Consultant

post; the Regional Hospital Board provides only $1\frac{1}{2}$ sessions per week.

No additional clinics were started but the clinic in Bridlington was extended to a regular weekly session. It has been possible to contain the waiting list, undertake intensive treatment in a reasonable number of cases, and offer a diagnostic service without too much delay in the majority of cases.

Close liaison has been maintained with the local hospital in-patient units for disturbed children and adolescents. It is presumed that this liaison will increase with the re-organisation of the Health Services in 1974.

A total of 159 cases were referred for child guidance, these being mainly from medical and educational sources. Four hundred and ten clinic sessions were held. The Medical Officer, Educational Psychologists and the Social Workers also made 581 visits to schools and 374 home visits. Of the 159 children referred 83 attended the various clinics regularly for treatment. One hundred and eighty-three cases were closed, and a summary of these cases is given on the following page. At the end of the year 64 children were attending clinics for treatment and 27 cases were on the waiting list.

The following table is a summary of the main types of cases examined by the clinic staff:—

Habit disorders	11
Nervous disorders	17
Behaviour disorders.....	127
Educational problems	4
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Total.....	159
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Cases seen at the clinic for the first time were, after diagnosis, placed into the following broad categories according to the type of problem and further clinic work that they would require:—

Clinic Advisory	School Advisory	Home Advisory	Not followed up
122	10	3	35

Summary of cases closed

Improved or completed (advice or treatment).....	121
Placement (Special School, Children's Homes etc.).	3
Not followed up (lack of co-operation, parents refused treatment, etc.).....	35
Transfer to other areas or agency	24
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Total.....	183
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ENURETIC CLINIC

A total of 3 cases were referred to this clinic during the year. Twenty-four cases were also brought forward from the previous year.

No. of attendances made	53
No. of cases completed	19
No. of uncompleted cases	7
No. of children on the waiting list	—
No. of children who failed appointments	1

INFECTIOUS DISEASES IN SCHOOLS

An outbreak of dysentery occurred at an Infants' School in the Haltemprice area during March. It commenced with ten children complaining of gastro-intestinal symptoms and, following submission of specimens to the Public Health Laboratory in Hull, it was confirmed that all were suffering from Shigella Sonne infection. Over the next five weeks a total of 236 cases were reported; these were mainly school children but 16 adults were also affected.

An outbreak of plantar warts occurred at a primary school in the Haltemprice area. A foot inspection of all the children was arranged and as a result 20 plantar warts and 5 athlete's foot were detected out of 620 on the roll. All cases were referred to their family doctor for treatment, and the school was advised about preventive steps to minimise this foot infection, including the correct use of footbaths, and a suggestion that all children should wear thin nylon socks when using the swimming pool.

Cases of head infestation continue to occur, but this is controlled by the vigilance of the school nursing staff during routine head inspections.

HANDICAPPED PUPILS

The appointment of two additional Educational Psychologists last year enabled many more backward children to be tested during 1972, and as a result there has been a considerable increase in the number of children found to be in need of special education.

The demand for places at the Driffield and Etton Pasture Special Schools continued to exceed the number available. To alleviate the position and also to provide much needed special educational facilities in the south eastern part of the County, a special class was opened in September at Hedon; this centre can accommodate 25 pupils and at the end of the year 17 children were attending.

The premises provided by the Brandesburton Hospital authorities to enable their patients of school age to receive education presented considerable difficulties from an educational point of view and, in November, arrangements were made for the children to be conveyed daily to Beverley where a recently vacated infants' school was

placed at their disposal. These premises enable the children to be taught in small groups which is advantageous to both staff and pupils. The children also gain by being in the community and the many visitors to the school, including children from nearby secondary schools, provide a much needed stimulus. There are 48 children on the Brandesburton Hospital School roll and at the end of the year 40 pupils were attending regularly.

The special class for severely mentally handicapped children held in the Cottingham Health Services Clinic was, owing to other clinic activities, limited to only two days a week. To enable the class to operate on a five-day week basis, alternative premises were obtained in May at Sutton Manor near Wawne. Ten children were in full-time attendance at the end of the year.

The total number of children ascertained as handicapped during 1972 was 110 and the following table shows the various categories in which they were placed together with the recommendations for their education:—

Category	Recommended for education in special schools	Recommended for education in prim./sec. schools	Recom- mended for home tuition
Blind.....	—	—	—
Partially sighted.....	—	1	—
Deaf.....	3	—	—
Partially Hearing.....	—	1	—
Educationally Sub-normal.....	37	44*	—
Epileptic.....	—	2	—
Maladjusted.....	7	—	—
Physically Handicapped.....	3	8	—
Delicate.....	—	3	1
Speech.....	—	—	—
Totals.....	50	59	1

*Included in this figure are 37 children who were recommended for admission to special classes for educationally sub-normal children.

SPECIAL ASCERTAINMENT EXAMINATIONS

During the year 94 children were specially examined and results of these examinations are shown in the following table:—

Recommended for admission to a special school for educationally subnormal children.....	37
Recommended for admission to day special classes.....	37
Recommended to remain at ordinary school.....	7
Recommended for remedial teaching.....	1
Not educationally sub-normal.....	8
Decision deferred.....	—
Re-examination.....	4
Total.....	94

The total number of children on the Register of Handicapped Pupils at the 31st December, 1972, is shown in the following table:—

Category	Recommended for education in special schools and special classes		Not recommended for special education		Totals		
	Attending special schools	Attending prim./sec. schools	Not attending school	Attending prim./sec. schools	Boys	Girls	Total
Blind.....	5	—	—	15	3	2	5
Partially-sighted.....	12	—	—	—	15	12	27
Deaf.....	10	—	1	—	—	4	12
Partially-hearing.....	26	—	—	16	8	4	42
Educationally Subnormal	235	91	56	40	24	18	454
Epileptic.....	2	—	1	—	—	2	6
Maladjusted.....	14	—	10	3	2	5	27
Physical.....	27	—	—	6	40	42	83
Delicate.....	3	—	4	—	2	31	50
Speech.....	—	—	1	—	1	—	1

Details of handicapped pupils admitted to and discharged from special schools during the year are as follows:—

Physical	Bethesda Special Sc., Cheadle.	1	—	—	—	1
	Chailey Heritage Craft School, Lewes, Sussex.....	—	1	—	—	1
	Chantrey School, Sheffield.....	3	—	1	1	2
	Frederick Holmes Sc., Hull....	19	1	5	—	15
	Ian Tetley Memorial Sc., Killinghall.....	—	1	—	—	1
	Irton Hall, Holmrook.....	1	1	—	—	2
	Larchfield School, Harrogate..	1	—	—	—	1
	Northfield Special School, York.....	—	1	—	—	1
	Welburn Hall, Kirbymoorside.	3	—	1	—	2
	Wilfred Pickles Sc., Tixover Grange, Lincs.....	—	1	—	—	1
	Valence School, Westerham...	1	—	1	—	—
Delicate	Abbots Lea School, Liverpool.....	1	—	—	—	1
	Children's Convalescent Home and School, West Kirby....	1	—	—	—	1
	Cottingham Road Sp. Sc., Hull.....	1	—	1	—	—
	Welburn Hall, Kirbymoorside.	2	—	1	—	1

The number of children attending special schools during the past ten years is as follows:—

	Blind and partially sighted	Deaf and partially hearing	Educ. Sub- normal	Epileptic	Malad- justed	Physi- cally handi- capped	Delicate	Speech
1963	9	14	89	4	7	19	9	—
1964	10	20	86	2	7	18	9	—
1965	7	23	99	4	7	18	14	—
1966	8	25	104	4	6	22	9	—
1967	10	30	111	3	9	25	10	—
1968	15	35	108	2	9	27	7	1
1969	14	35	106	2	8	29	6	2
1970	16	35	99	3	6	29	4	1
1971	18	35	219	3	15	29	5	—
1972	17	36	235	2	14	27	3	—

PHYSICAL EDUCATION

The pupils enjoyed a full programme of physical education and they were fortunate in having qualified teachers in all schools. The total number of pupils in the County continues to grow and some of the large comprehensive schools are now being provided with facilities such as sports halls, which enable the physical education programme to be wider in concept and more satisfying to the older pupils.

These sports halls are fully used by the public in the evenings and at weekends, as are the larger swimming pools. This usage goes part of the way towards achieving the aim of the Sports Council to see established sports centres, which include social amenities, throughout the country. Such a centre is being built by the Haltemprice

U.D.C. and, when ready in 1973, will not only provide the public with recreational facilities, but their swimming pool, sports hall and squash courts will be used during the daytime by some of the neighbouring schools.

It is interesting to note that television coverage of the 1972 Olympic Games has stimulated the interest of pupils in volleyball and gymnastics which were given more viewing time than on previous occasions.

HYGIENE IN SCHOOL PREMISES

Sixty one reports on the sanitary conditions at schools have been made by the Medical Officers and any defects have been brought to the notice of the Chief Education Officer.

MEDICAL EXAMINATION OF CANDIDATES FOR ADMISSION TO TRAINING COLLEGES, ETC.

A total of 375 candidates for admission to training colleges and 47 entrants to the teaching profession were examined by the medical staff of the School Health Service.

CO-OPERATION WITH TEACHERS, SCHOOL WELFARE OFFICERS AND VOLUNTARY BODIES

As in past years, the co-operation of school staffs has been invaluable in dealing with the clerical work in connection with medical and dental inspections. For this assistance and for that given by the school welfare officers, I would like to record my appreciation.

CLINICS

At the end of the year the following clinics were being held:—

Type of Clinic	Location	Frequency of sessions
A. Minor Ailment and other non-specialist examinations and treatment	Anlaby Clinic..... Beverley, Coltman Avenue Clinic..... Beverley School Clinic, Lord Roberts Road..... Beverley, Longcroft School..... Bridlington, Oxford Street Clinic..... Cottingham Clinic..... Etton Pasture (E.S.N.) School..... Hornsea School..... South Holderness School..... Thorngumbald Clinic..... Withernsea Clinic.....	Health Visitors use most of the premises mentioned in the previous column as their offices and they are available for about one hour each week-day for the treatment of minor ailments
B. Dental *	Anlaby Dental Clinic..... Beverley Dental Clinic..... Bridlington Dental Clinic..... Driffield Dental Clinic..... Pocklington Health Centre..... Withernsea Dental Clinic..... Hessle Health Centre.....	8 sessions weekly 6 sessions weekly 10 sessions weekly 2 sessions weekly 6 sessions weekly 4 sessions weekly 4 sessions weekly
C. Speech Therapy †	Anlaby Clinic..... Beverley Clinic..... Beverley, Coltman Avenue Clinic..... Brandesburton Hospital Spec. School..... Bridlington, Oxford St. Clinic..... Cottingham Clinic..... Driffield Clinic..... Driffield Special School..... Etton Pasture Special School..... Hessle C.E. School..... Hessle Penshurst School..... Hilderthorpe E.S.N. Centre..... Hornsea County Library..... Kirkella C.E. School..... Pocklington Health Centre..... Withernsea Infants' School..... Willerby Carr Lane C.P. School.....	1 session weekly 4 sessions weekly 1 session weekly 1 session weekly 1 session weekly 6 sessions weekly 2 sessions weekly 2 sessions weekly 3 sessions weekly 1 session weekly 2 sessions weekly 1 session weekly 1 session weekly 1 session weekly 1 session weekly 1 session weekly 2 sessions weekly 2 sessions weekly 1 session weekly
D. Ophthalmic	Anlaby Clinic..... Beverley School Clinic, Lord Roberts Road..... Fulford School..... Howden School..... Market Weighton C.S. School..... Pocklington Health Centre.....	1 session weekly 1 session weekly 1 session monthly 1 session fortnightly 1 session quarterly 1 session monthly
E. Ultra Violet Light	Beverley School Clinic, Lord Roberts Road.....	As required
F. Enuretic	Child Guidance Clinic, Beverley.....	1 session weekly
G. Chiropody	Beverley School Clinic, Lord Roberts Road.....	1 session weekly

*In addition 7 mobile clinics were in use.

†In addition, the speech therapists regularly visited 14 village schools.

MEDICAL INSPECTION RETURNS

YEAR ENDED 31st DECEMBER, 1972

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

PERIODIC MEDICAL INSPECTIONS

Age groups inspected (by year of birth) (1)	Number of pupils inspected (2)	Physical condition of pupils inspected		No. of pupils screened but not examined (5)
		Satisfactory (3)	Unsatisfactory (4)	
1968 and later	72	72	—	—
1967	2,733	2,733	—	—
1966	1,699	1,699	—	18
1965	669	669	—	273
1964	190	190	—	208
1963	74	74	—	54
1962	568	568	—	833
1961	829	829	—	957
1960	315	315	—	272
1959	23	23	—	3
1958	472	472	—	1,023
1957 and earlier	368	368	—	1,053
Totals	8,012	8,012	—	4,694

PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding dental diseases and infestation with vermin)

Age groups inspected (by year of birth) (1)	For defective vision (excluding) squint (2)	For other conditions (3)	Total individual pupils (4)
1968 and later	—	—	—
1967	17	60	76
1966	22	48	70
1965	21	24	45
1964	7	14	21
1963	6	3	9
1962	18	22	40
1961	25	18	43
1960	8	8	16
1959	—	3	3
1958	15	18	33
1957 and earlier	17	9	26
Totals	156	227	382

OTHER INSPECTIONS

Number of special inspections	154
Number of re-inspections	3,787
Total	3,941

INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons.....	76,770
(b) Total number of individual pupils found to be infested.....	513
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).....	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).....	—

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint..	7
Errors of refraction (including squint).....	663
Total	670
Number of pupils for whom spectacles were prescribed	248

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been treated
Received operative treatment—	
(a) For diseases of the ear	6
(b) For adenoids and chronic tonsillitis	49
(c) For other nose and throat conditions	11
Received other forms of treatment	31
Total	97
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) In 1972	2
(b) In previous years.....	14

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments.....	6
(b) Pupils treated at school for postural defects	12
Total	<u>18</u>

DISEASES OF THE SKIN (excluding uncleanliness)

	Number of cases known to have been treated
Ringworm—	—
(a) Scalp	—
(b) Body	2
Scabies.....	24
Impetigo.....	43
Other skin diseases.....	214
Total	<u>283</u>

CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	83

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	350

OTHER TREATMENT GIVEN

	Number of cases known to have been treated
(a) Pupils with minor ailments	765
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	3,899
(d) Other than (a), (b) or (c) above, Chiropody	196
Total	<u>4,860</u>

**DENTAL INSPECTION AND TREATMENT CARRIED OUT
BY THE AUTHORITY**

	Number of pupils		
	Inspected	Requiring treatment	Offered treatment
1. INSPECTIONS			
(a) First inspection—school . . .	33,837	16,812	16,498
(b) First inspection—clinic	2,967		
(c) Re-inspection—school or clinic	2,539	1,341	1,336
Totals	39,343	18,153	17,834
2. VISITS	Ages 5-9	Ages 10-14	Ages 15 and over
First visit in the calendar year	3,987	2,896	534
Subsequent visits	4,259	4,699	1,141
Total visits	8,246	7,595	1,675
3. COURSES OF TREATMENT			
Additional courses commenced	374	325	76
Total courses commenced	4,361	3,221	610
Courses completed	—	—	—
			7,207
4. TREATMENT			
Fillings in permanent teeth	4,959	8,963	2,217
Fillings in deciduous teeth	6,221	458	—
Permanent teeth filled	3,371	7,064	1,867
Deciduous teeth filled	5,307	396	—
Permanent teeth extracted	160	829	170
Deciduous teeth extracted	2,925	919	—
Number of general anaesthetics	936	364	34
Number of emergencies	192	72	21
			16,139
			6,679
			12,302
			5,703
			1,159
			3,844
			1,334
			285
5. ORTHODONTICS			
Number of pupils X-rayed			351
Prophylaxis			2,906
Teeth otherwise conserved			208
Teeth root filled			31
Inlays			2
Crowns			64
New cases commenced during the year ..			104
Cases completed during the year			90
Cases discontinued during the year			12
Number of removable appliances fitted ..			148
Number of fixed appliances fitted			1
Number of pupils referred to Hospital Consultants			19

6. DENTURES

	Ages 5-9	Ages 10-14	Ages 15 and over	Total
Number of pupils fitted with dentures for the first time				
(a) with full denture.....	—	—	1	1
(b) with other dentures.....	1	11	6	18
Total.....	1	11	7	19
Number of dentures supplied (first or subsequent time).....	2	14	12	28

7. ANAESTHETICS

Number of general anaesthetics administered by Dental Officers..... 731

8. SESSIONS

	Admin- istrative sessions	Number of clinical sessions worked in the year						Total sessions	
		School Service			M. & C.W. Service				
		Inspection at school	Treatment	Dental Health Education	Treatment	Dental Health Education			
Dental Officers (inc.P.S.D.O.)	279	242	3,415	4	85	59	4,084		
Dental Auxiliaries	—	—	—	—	—	—	—		
Dental Hygienists	—	—	227	206	10	13	456		
Total	279	242	3,642	210	95	72	4,540		

DENTAL HYGIENISTS

	Ages 5-9	Ages 10-14	Ages 15 and over	Total
1. VISITS				
First visit in the calendar year.....	329	370	126	825
Subsequent visits.....	—	—	—	—
Total visits.....	329	370	126	825
2. COURSES OF TREATMENT				
Additional courses commenced.....	64	49	28	141
Total courses commenced.....	393	419	154	966
Courses completed.....	—	—	—	966
3. TREATMENT				
Prophylaxis.....	—	—	—	966

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